Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF INDIANA, EVANSVILLE DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

#### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name				
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Eric First name D	First name		
	Bring your picture identification to your meeting with the trustee.	Middle name  O'Brian  Last name and Suffix (Sr., Jr., II, III)	Middle name  Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years	Eric Dwayne O'Brian			
	Include your married or maiden names.				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3888			

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 2 of 57

Debtor 1 O'Brian, Eric D

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs		
5.	Where you live	401 Stanley Ave Evansville, IN 47711-3349  Number, Street, City, State & ZIP Code  Vanderburgh  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any	If Debtor 2 lives at a different address:  Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 3 of 57

Deb	otor 1	O'Brian, Eric D					Case number (if known)	
Par	t 2:	Tell the Court About Y	our Bank	ruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are choosing to file under						v 11 U.S.C. § 342(b) for Individuals Filing fo	or Bankruptcy (Form
	CHOC	ising to me under	■ Chap	oter 7				
			☐ Chap	oter 11				
			☐ Chap	oter 12				
			☐ Chap	oter 13				
8.	How	you will pay the fee	ab If y	out how yo	u may pay. Typically, if you a ey is submitting your paymer	are paying the fee yo	eck with the clerk's office in your local cour ourself, you may pay with cash, cashier's c ur attorney may pay with a credit card or ch	heck, or money order.
							tion, sign and attach the Application for Inc	lividuals to Pay The
			☐ Ir	equest tha	Installments (Official Form 1 at my fee be waived (You n o, waive your fee, and may o	nay request this option	on only if you are filing for Chapter 7. By la ome is less than 150% of the official pover	w, a judge may, but is ty line that applies to
			yo	ur family si	ze and you are unable to pay	the fee in installme	ents). If you choose this option, you must fil B) and file it with your petition.	
9.	Have	you filed for	■ No.					
	bank 8 yea	ruptcy within the last	☐ Yes.					
	o yea		□ Tes.	District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.	Are a	any bankruptcy cases	■ No					
	pend a spo this a bus	ling or being filed by buse who is not filing case with you, or by siness partner, or by filiate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your lence?	■ No.	Go to	line 12.			
	resid	lence r	☐ Yes.	Has yo	our landlord obtained an evi	ction judgment aga	inst you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial Stateme</i> bankruptcy petition.	nt About an Eviction	n Judgment Against You (Form 101A) and	file it as part of this

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 4 of 57

Deb	otor 1 O'Brian, Eric D			Case number (if known)				
Par	Report About Any Bus	sinesses `	You Own as a Sole Prop	rietor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	Yes. Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if a	any				
	If you have more than one sole proprietorship, use a separate sheet and attach it		Number, Street, City,	State & ZIP Code				
	to this petition.		Check the appropriate	e box to describe your business:				
			☐ Health Care B	usiness (as defined in 11 U.S.C. § 101(27A))				
			☐ Single Asset F	Real Estate (as defined in 11 U.S.C. § 101(51B))				
			☐ Stockbroker (a	as defined in 11 U.S.C. § 101(53A))				
			☐ Commodity Br	oker (as defined in 11 U.S.C. § 101(6))				
			☐ None of the al	pove				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it cadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sherations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow. S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am not filing under C	Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chap Code.	oter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.	I am filing under Chap	oter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4: Report if You Own or	Have Any	Hazardous Property or	Any Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of							
	imminent and identifiable hazard to public health or	<b>□</b> 163.	What is the hazard?					
	safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed	?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?							
	·			Number, Street, City, State & Zip Code				

Debtor 1 O'Brian, Eric D Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

I received a briefing from an approved credit

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:

П Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 6 of 57

Deb	tor 1 O'Brian, Eric D				Case numbe	r (if known)		
Par	t 6: Answer These Questi	ons for Re	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily individual primarily for a per		debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an ly, or household purpose."			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily for a business or investmen			at you incurred to obtain money vestment.		
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consum	er debts or business d	ebts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. paid that funds will be availa			is excluded and administrative expenses are		
	administrative expenses are paid that funds will be		■ No					
	available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	)	<b>1</b> 25,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,00		<u></u> 50,001-100,000		
		□ 100-1 □ 200-9		☐ 10,001-25,000 ☐ More than100,000				
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000	<b>\$10,000,00</b>	□ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion			
	be worth:		001 - \$500,000		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		<b>□</b> \$500,	001 - \$1 million	<b>—</b> \$100,000,0	01 - \$300 Hillion	More than \$50 billion		
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000		□ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$			
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million			1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
Par	7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, Unite States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
If no attorney represents me and I did not pay or agree to pay someone who is no have obtained and read the notice required by 11 U.S.C. § 342(b).						attorney to help me fill out this document, I		
		I request	relief in accordance with the	e chapter of title 11, Unit	ed States Code, spec	ified in this petition.		
I understand making a false statement, concealing property, or obtaining money or procase can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 1 /s/ Eric D O'Brian								
		Eric D			Signature of Debtor	-2		
		Executed	September 16, 20 MM / DD / YYYY	19	Executed on MM	/ DD / YYYY		

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 7 of 57

Debtor 1 O'Brian, Eric D Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

k J. Miller	Date	September 16, 2019
re of Attorney for Debtor	- -	MM / DD / YYYY
Miller		
aw Offices of Dax J. Miller, LLC		
е		
W 4th St Ste 111		
ville, IN 47708-1356		
Street, City, State & ZIP Code		
hone (812) 286-0776	Email address	dax@daxjmiller.com
-82 (IN)		_
W 4th St Ste 111 ville, IN 47708-1356 Street, City, State & ZIP Code hone (812) 286-0776	Email address	dax@daxjmiller.com

	Case 19-71170-AKM	-7 Doc 1	Filed 09	/16/19	EOD 08	9/16/19 1	6:42:41	Pg 8	OT 57
	Fill in this information to identif	fy your case:							
Deb	tor 1 Eric D O'Brian								
Dob	First Name	Middle Name		Last Name	)		}		
	use if, filing) First Name	Middle Name		Last Name	)				
Unit	ed States Bankruptcy Court for the:	SOUTHERN DIS	STRICT OF IN	NDIANA, EV	ANSVILLE D	IVISION			
	e number								
(if kn	own)							_	if this is an ded filing
Off	icial Form 106Sum								
	mmary of Your Assets a	and Liabiliti	es and C	ertain S	Statistica	al Inform	ation	1	12/15
Be a	s complete and accurate as possible mation. Fill out all of your schedule original forms, you must fill out a n	e. If two married p	eople are fili lete the infor	ng together	r, both are ed this form. If y	ually respor	nsible for s		
								Your as	ssets
									f what you own
1.	<b>Schedule A/B: Property</b> (Official For 1a. Copy line 55, Total real estate, from 1a. Copy line 55, Total real estate, from 1a.	rm 106A/B) om Schedule A/B						\$	65,000.00
	1b. Copy line 62, Total personal prop	perty, from Schedul	le A/B					\$	30,200.00
	1c. Copy line 63, Total of all property	on Schedule A/B.						\$	95,200.00
Par	2: Summarize Your Liabilities								
									abilities you owe
2.	Schedule D: Creditors Who Have Cla 2a. Copy the total you listed in Colum					1 of Schedul	e D	\$	83,755.00
3.	Schedule E/F: Creditors Who Have U 3a. Copy the total claims from Part 1				chedule E/F			\$	2,595.00
	3b. Copy the total claims from Part 2	2 (nonpriority unsec	cured claims)	from line 6j	യ്യ്chedule E/i	F		\$	15,605.00
						Your total	liabilities	\$	101,955.00
Par	3: Summarize Your Income and	Expenses							
4.	Schedule I: Your Income(Official For Copy your combined monthly income	m 106I) e from line 12 o <b>\$</b> ch	edule I					\$	2,458.63
5.	Schedule J: Your Expenses (Official Copy your monthly expenses from line		J					\$	2,563.00
Par	4: Answer These Questions for A	Administrative and	d Statistical I	Records					
6.	Are you filing for bankruptcy unde ☐ No. You have nothing to report or	•		s box and su	ıbmit this form	to the court v	with your oth	ner schedul	es.
7.	■ Yes What kind of debt do you have?								

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

#### Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 9 of 57

Debtor 1 **O'Brian, Eric D** Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_4,135.72

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,595.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	291.00
<ol> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</li> </ol>	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	2,886.00

#### Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 FOD 09/16/19 16:42:41 Pg 10 of 57

Ouse	10 / 11/0 / ((()			i iica oo	/10/10 L	.00 00/10	/ ±0 ±0.¬	2.71	9 10 01 01	
Fill in thi	is information to ident	ify your case a	and th	nis filing:						
Debtor 1	Eric D O'Brian									
	First Name	Middle N	Name		Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle N	Name		Last Name					
-	nkruptcy Court for the:	SOUTHERN	I DIST	RICT OF IN	DIANA EVANS	SVILLE DIVISIO	) NO			
	intropiety Court for the.			11.01 01 111	20,000, 20,000	THE DIVIOR				
Case number _									☐ Check if the amended	
<u> Official Fo</u>	rm 106A/B									
Schedul	e A/B: Prop	perty							12/15	
Answer every ques	e space is needed, attach tion. Each Residence, Buildin	·							(	
. Do you own or h	nave any legal or equitabl	e interest in any	y resid	lence, buildin	ıg, land, or simil	ar property?				
☐ No. Go to Par										
Yes. Where is	s the property?									
401 Stanke Street address,  Evansville City  Vanderbu County	if available, or other description  IN 47  State	711-3349 ZIP Code		Single-familiand Duplex or randomining Condomining Manufacture Land Investment Timeshare Other Debtor 1 or Debtor 2 or Debtor 1 ar	um or cooperative red or mobile hon property  est in the proper hly hly nd Debtor 2 only	ty? Check one	Current va entire prop	lue of the perty?  55,000.00  he nature of yee simple, tere), if known.  ple	community property	of the one
			prop Pur	er information perty identific chased fo	e of the debtors anyou wish to ad ation number: or \$60,000.00 \$59,800.00	d about this iten	(see ins	structions)	ay proporty	
	ar value of the portion ached for Part 1. Write							ages	\$65,00	0.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor 1 (	O'Brian, Eric D		ase number (if known)	
. Cars, vans	, trucks, tractors, sport utility vel	nicles, motorcycles		
		-		
☐ No				
Yes				
3.1 Make:	Chevrolet	Who has an interest in the property? Check one		claims or exemptions. Put red claims on <i>Schedule D</i> :
Model:	S10 Pickup 2WD	Debtor 1 only	,	aims Secured by Property.
Year:	1998	Debtor 2 only	Current value of the	Current value of the
	imate mileage: 102000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other in	nformation:	At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$2,500.00	\$2,500.00
3.2 Make:	Ford	Who has an interest in the property? Check one		claims or exemptions. Put red claims on <i>Schedule D</i> :
Model:	Edge FWD	Debtor 1 only		aims Secured by Property.
Year:	2015	Debtor 2 only	Current value of the	Current value of the
• • •	imate mileage: 65000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	nformation:	At least one of the debtors and another		
Joint	w/ ex-girlfriend.	☐ Check if this is community property (see instructions)	\$15,000.00	\$15,000.00
		n for all of your entries from Part 2, including any		\$17,500.00
Part 3: Desci	ribe Your Personal and Household Ite	nme.		
		erns erest in any of the following items?		Current value of the
·	, , ,	cross in any or the ronowing nems.		portion you own? Do not deduct secured claims or exemptions.
	I goods and furnishings Major appliances, furniture, linens,	china, kitchenware		
Yes. D				
		, Living Room Suite, Refrigerator, Stove/C sher/Dryer, Miscellaneous Household Iter		\$1,000.0
Electronics Examples:		o, stereo, and digital equipment; computers, printers, ledia players, games	scanners; music collections	; electronic devices
□ No		· · · · · ·		
Yes. D	escribe			
	Television (2), (	Cell Phone		\$750.0
. Collectible		rints, or other artwork; books, pictures, or other art ol	piacte: etamp coin or haca	hall card collections; other
∟ханірі <del>с</del> 8.	collections, memorabilia, collectible		goots, starrip, coirr, or baser	oan cara con <del>c</del> cions, othe
No	,			

☐ Yes. Describe.....

page 2

#### **Checking Account Old National Bank** \$700.00 17.1. 18. Bonds, mutual funds, or publicly traded stocks

Institution name:

Yes.....

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

■ No ☐ Yes..... Institution or issuer name:

Official Form 106A/B Schedule A/B: Property page 3

22.		prepayments d deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or other	s
	☐ Yes	Institution name or individual:	
	■ No	r a periodic payment of money to you, either for life or for a number of years)	
	26 U.S.C. §§ 530(b)(1), 5	on IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 529A(b), and 529(b)(1).  Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.		ture interests in property (other than anything listed in line 1), and rights or powers exercisable f	or your benefit
		ademarks, trade secrets, and other intellectual property ain names, websites, proceeds from royalties and licensing agreements formation about them	
		and other general intangibles mits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ormation about them	
M	oney or property owed t	po Do	ortion you own? o not deduct secured aims or exemptions.
	Tax refunds owed to yo ■ No □ Yes. Give specific info	ou ormation about them, including whether you already filed the returns and the tax years	
	Family support  Examples: Past due or  No  Yes. Give specific info	lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settleme	nt
	cial Form 106A/B ware Copyright (c) 2019 CINGrou	Schedule A/B: Property up - www.cincompass.com	page 4

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 14 of 57 O'Brian, Eric D Debtor 1 Case number (if known) 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No  $\square$  Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for \$10,700.00 Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

Schedule A/B: Property

54. Add the dollar value of all of your entries from Part 7. Write that number here .....

☐ Yes. Give specific information.......

■ No

Official Form 106A/B

\$0.00

## Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 15 of 57

Debto	or 1 O'Brian, Eric D			Case number (if known)	
Part 8:	List the Totals of Each Part of this Form				
55. <b>F</b>	Part 1: Total real estate, line 2				\$65,000.00
56. <b>F</b>	Part 2: Total vehicles, line 5		\$17,500.00		
57. <b>F</b>	Part 3: Total personal and household items, line 15		\$2,000.00		
58. <b>F</b>	Part 4: Total financial assets, line 36		\$10,700.00		
59. <b>F</b>	Part 5: Total business-related property, line 45		\$0.00		
60. <b>F</b>	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61. <b>F</b>	Part 7: Total other property not listed, line 54	+	\$0.00		
62. 1	Total personal property. Add lines 56 through 61	_	\$30,200.00	Copy personal property total	\$30,200.00
63. <b>1</b>	Total of all property on Schedule A/B. Add line 55 + line 62				\$95,200.00

Official Form 106A/B Schedule A/B: Property page 6

	Fill in this	information to identify you	ur case:			
Deb	otor 1	Eric D O'Brian				
Dak		First Name	Middle Name	L	ast Name	
	otor 2 use if, filing)	First Name	Middle Name	L	ast Name	
Unit	ted States Ban	kruptcy Court for the: SC	OUTHERN DISTRICT OF	INDIA	NA, EVANSVILLE DIVISION	
Cas	se number					
	nown)					☐ Check if this is an amended filing
Of	ficial For	m 106C				
Sc	chedule	C: The Prope	erty You Cla	im	as Exempt	4/19
orope	erty you listed o and attach to thi	n Schedule A/B: Property(C	Official Form 106A/B) as yo	ur sou		plying correct information. Using the sexempt. If more space is needed, fill , write your name and case number (if
spec appl fund to a	cific dollar ame icable statuto Is—may be un	ount as exempt. Alternative ry limit. Some exemptions- limited in dollar amount. H ar amount and the value o	ely, you may claim the fu —such as those for healt lowever, if you claim an	ıll fair th aid: exemp	s, rights to receive certain benefits	g exempted up to the amount of any s, and tax-exempt retirement under a law that limits the exemptior
Par	t 1: Identify	the Property You Claim a	s Exempt			
		exemptions are you claimin	-	if vou	r spouse is filing with vou.	
	_	ming state and federal nonba		•	, ,	
	_	•		0.0.0	. 8 322(0)(3)	
		ming federal exemptions. 11				
			•	• •	ill in the information below.	<b>.</b>
		n of the property and line on nat lists this property	Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
			\$65,000.00	_	\$42.00	Ind. Code § 34-55-10-2(c)(1)
	401 Stanley Evansville II County: Va Line from Sche	N, 47711-3349 nderburgh		_	100% of fair market value, up to any applicable statutory limit	
	Chevrolet		\$2,500.00		\$0.00	Ind. Code § 34-55-10-2(c)(2)
	S10 Pickup 1998	2WD			100% of fair market value, up to	
	102000 Line from Sche	edule A/B. <b>3.1</b>			any applicable statutory limit	
		uite, Living Room Suite	\$1,000.00	•	\$1,000.00	Ind. Code § 34-55-10-2(c)(2)
Refrigerator, Stove/Oven, Microwave, Washer/Dryer, Miscellaneous Household Items Line from Schedule A/B 6.1				100% of fair market value, up to any applicable statutory limit		
	Television (	2), Cell Phone edule A/B 7.1	\$750.00		\$750.00	Ind. Code § 34-55-10-2(c)(2)

Official Form 106C

☐ 100% of fair market value, up to any applicable statutory limit

# Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 17 of 57

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.		
	Golf Clubs Line from Schedule A/B 9.1	\$50.00		\$50.00	Ind. Code § 34-55-10-2(c)(2)
	Line Holli Schedule AVD. 3.1			100% of fair market value, up to any applicable statutory limit	
	Debtor's Clothing Line from Schedule A/B 11.1	\$200.00		\$200.00	Ind. Code § 34-55-10-2(c)(2)
	Ellie II olii oo nodale 702. TTT			100% of fair market value, up to any applicable statutory limit	
	Old National Bank Line from Schedule A/B: 17.1	\$700.00		\$400.00	Ind. Code § 34-55-10-2(c)(3)
	Zino nom odynodate / v Zi YYYY			100% of fair market value, up to any applicable statutory limit	
	Transamerica Line from Schedule A/B 21.1	\$10,000.00		\$10,000.00	Ind. Code § 5-10.3-8-9
	Ellie II olii oonodale 702. <b>2111</b>			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3			on or after the date of adjustment.)	
	■ No				
	☐ Yes. Did you acquire the property covere	d by the exemption withir	n 1,21	5 days before you filed this case?	
	□ No				
	☐ Yes				

Case 1	9-11110-AKIV	1-7 DOC 1 Filed 09/10/19 E	OD 09/10/19 16	5.42.41 Py 18	5 01 57
Fill in this in	formation to ident	ify your case:			
Debtor 1	Eric D O'Brian				
_	First Name	Middle Name Last Name		}	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
			0) (       E D ) ( 0 0)		
United States Bankru	uptcy Court for the:	SOUTHERN DISTRICT OF INDIANA, EVAN:	SVILLE DIVISION		
Case number				<del>_</del>	if this is an
				amend	led filing
Official Form 1	06D				
Schedule D	 : Creditors	Who Have Claims Secured	d by Property	/	12/15
Be as complete and ac	curate as possible. If	two married people are filing together, both are equ , number the entries, and attach it to this form. On th	ually responsible for sup	plying correct informati	
1. Do any creditors hav	e claims secured by	your property?			
□ No. Check this	s box and submit thi	s form to the court with your other schedules. You	have nothing else to rep	oort on this form.	
Yes. Fill in all	of the information be	elow.			
Part 1: List All Se	ecured Claims				
2. List all secured clair	ms. If a creditor has m	nore than one secured claim, list the creditor separately	Column A	Column B	Column C
		a particular claim, list the other creditors in Part 2. As all order according to the creditor 's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 BSI Financia	I Services	Describe the property that secures the claim:	\$64,958.00	\$65,000.00	\$0.00
Creditor's Name		401 Stanley Ave, Evansville, IN 47711-3349			
1425 Greenv	vay Dr Ste	Purchased for \$60,000.00 in 2007 Assessed at \$59,800.00 As of the date you file, the claim is: Check all that			
400	•	apply.			
Irving, TX 75		Contingent			
Number, Street, City	y, State & Zip Code	Unliquidated			
Who owes the debt?	Check one	Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only	Chicon chici	☐ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor	r 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the d	•	☐ Judgment lien from a lawsuit			
Check if this claim community debt		Other (including a right to offset)			
Date debt was incurre	d	Last 4 digits of account number			

## Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 19 of 57

Debtor 1 Eric D O'Brian				e number (f known)		
	First Name Middle Na	ame Last Name				
1フフ 1	LinoIn Automotive Financial Services	Describe the property that secures the clai	m:	\$15,524.00	\$15,000.00	\$524.00
-	Creditor's Name	2015 Ford Edge FWD			<u> </u>	
		Joint w/ ex-girlfriend.				
	Attn: Bankruptcy					
	PO Box 542000	As of the date you file, the claim is: Check a apply.	ll that			
(	Omaha, NE 68154-8000	Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who o	wes the debt? Check one.	Nature of lien. Check all that apply.				
■ Deb	otor 1 only	☐ An agreement you made (such as mortgage	je or secured	t		
☐ Deb	otor 2 only	car loan)				
_	otor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)			
☐ At le	east one of the debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Che	eck if this claim relates to a	☐ Other (including a right to offset)				
co	mmunity debt					
Doto d	abt was incomed 2045 20	Lock 4 digits of account number	0450			
Date d	ebt was incurred 2015-09	Last 4 digits of account number	2152			
	Onemain Financial Creditor's Name	Describe the property that secures the clai	m:	\$3,273.00	\$2,500.00	\$773.00
		1998 Chevrolet S10 Pickup 2WD				
	Attn: Bankruptcy PO Box 3251					
-	Evansville, IN	As of the date you file, the claim is: Check a	II that			
	47731-3251	apply.  Contingent				
_	Number, Street, City, State & Zip Code	☐ Unliquidated				
	vumber, offeet, only, offate & Zip oode	☐ Disputed				
Who o	wes the debt? Check one.	Nature of lien. Check all that apply.				
_	otor 1 only	☐ An agreement you made (such as mortgage	e or secured	1		
_	•	car loan)	je or secure	4		
_	otor 2 only	Chatridan line (assables house as a secolistic and a single	l' \			
_	otor 1 and Debtor 2 only east one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's ☐ Judgment lien from a lawsuit	ilen)			
_	eck if this claim relates to a	☐ Other (including a right to offset)				
	mmunity debt	Other (including a right to onset)				
	•					
Date d	ebt was incurred 2019-08	Last 4 digits of account number	8342			
					-	
	-	umn A on this page. Write that number here:		\$83,755.00	_	
	is the last page of your form, add th hat number here:	e dollar value totals from all pages.		\$83,755.00		
Will t	nat namber nere.			<u> </u>	J	
Part 2	List Others to Be Notified for	a Debt That You Already Listed				
Use th	is page only if you have others to be	e notified about your bankruptcy for a debt the	nat you alre	ady listed in Part 1. For	example, if a collection	agency is
		we to someone else, list the creditor in Part 1				
	in Part 1, do not fill out or submit th	you listed in Part 1, list the additional credite is page.	ors nere. If y	ou do not have addition	ai persons to be notine	d for any
	<b>,</b>					
Ш	Name, Number, Street, City, State & 2	Zip Code	On which lin	ne in Part 1 did you enter t	the creditor? 2.2	
	Ford Motor Credit Comp			2 2 2 2 7 2 2 3 1 10 1		
	PO Box 542000		Last 4 digits	s of account number 21	<u>52</u>	
	Omaha, NE 68154-8000					
$\overline{\Box}$						
Ш	Name, Number, Street, City, State & 2	Zip Code	On which lir	ne in Part 1 did you enter t	the creditor? 2.3	
	Onemain			2 2 2 2 7 2 2 3 1 10 1		
	PO Box 1010		Last 4 digits	s of account number 83	42_	
	Evansville, IN 47706-1010					

Official Form 106D

# Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 20 of 57

		ormation to identify you	ui casc.							
Deb	otor 1	Eric D O'Brian First Name	N A: al a	dle Name	Last Name					
Deł	otor 2	First Name	IVIIdo	ne name	Last Name					
	ouse if, filing)	First Name	Mido	lle Name	Last Name					
Uni	ted States Bar	nkruptcy Court for the:	SOUTHE	ERN DISTRICT OF	INDIANA, EVANS	VILLE DIVISION				
	se number _									
(if kr	nown)								f this is an	Ì
								amende	ea ming	
Off	icial Form	n 106E/F								
<u>Sc</u>	hedule E	/F: Creditors W	/ho Hav	ve Unsecure	ed Claims				12/15	5
Sche D: Ci the C case	edule G: Execut reditors Who H Continuation Pa number (if kno	tory Contracts and Unexp ave Claims Secured by Pr age to this page. If you ha own).	ired Leases roperty. If m ve no inforn	(Official Form 106G ore space is needed nation to report in a	i). Do not include any I, copy the Part you i	tracts on Schedule A/B: Po y creditors with partially se need, fill it out, number the Part. On the top of any add	cured claim entries in t	is that are he boxes	e listed in S on the left	Schedule . Attach
		I of Your PRIORITY Un  ors have priority unsecure								
1.	No. Go to Pa	• •	a ciaims ag	amst you?						
	Yes.	art z.								
2.	List all of your identify what typ possible, list the	be of claim it is. If a claim ha	as both priori er according	ty and nonpriority am to the creditor 's nam	ounts, list that claim hee. If you have more th	im, list the creditor separatel ere and show both priority and an two priority unsecured cla	nd nonpriority	/ amounts	. As much a	as
	(For an explana	ation of each type of claim,	see the instru	uctions for this form in	the instruction bookle	et.) Total claim	Priority		Nonpriorit	v
	7					Total olalii	amount		amount	. <b>,</b>
2.1		Revenue Service		Last 4 digits of ac	count number	\$2,595.00	\$2,	<u>595.00</u>		\$0.00
	Centrali	ized Insolvency Ope	eration	When was the deb	ot incurred?		_			
	PO Box									
		Iphia, PA 19101-734 treet City State Zip Code	10	As of the date you	file, the claim is: Ch	eck all that apply				
	Who incurred	the debt? Check one.		☐ Contingent						
	Debtor 1 o	nly		☐ Unliquidated						
	Debtor 2 o	nly		Disputed						
		nd Debtor 2 only		Type of PRIORITY	unsecured claim:					
	_	e of the debtors and another	ar.	Domestic suppo						
		his claim is for a commu		_	nin other debts you ow	to the government				
		nis ciaim is for a commul subject to offset?	nity debt		•	nile you were intoxicated				
	No	subject to onset?			Tor personal injury wit	me you were intoxicated				
	☐ Yes			☐ Other. Specify						
Por	t 2: List Al	I of Your NONPRIORIT	V Unagair	ad Claima						
		ors have nonpriority unsec								
J.	_ `	ve nothing to report in this p		· ·	with your other schedu	alos				
		re notining to report in this p	art. Gubiiiit li	ins form to the coult v	viiii youi oniei soneuu	iioo.				
	Yes.									
4.	unsecured clain	n, list the creditor separately	y for each cla	aim. For each claim lis	sted, identify what type	olds each claim. If a credito e of claim it is. Do not list cla ree nonpriority unsecured cla	ms already i	ncluded in	Part 1. If m	

Total claim

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 21 of 57

Debtor	1 O'Brian, Eric D		Case number (f known)	
4.1	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9784	\$467.00
	Attn: Bankruptcy PO Box 30285	When was the debt incurred?	2018-08	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.2	Day Knight & Associates  Nonpriority Creditor's Name	Last 4 digits of account number		\$104.00
	Nonpriority Creditor's Name	When was the debt incurred?		
	15559 Manchester Rd Ballwin, MO 63011-3001			
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.3	Diversified Consultants, Inc.	Last 4 digits of account number	1237	\$168.00
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	2018-09	
	PO Box 679543		2010 00	
	Dallas, TX 75267-9543	_		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured		
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 22 of 57

Debt	or 1 O'Brian, Eric D		Case number (f known)					
4.4	Diversified Consultants, Inc.	Last 4 digits of account number	7405	\$246.00				
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 679543	When was the debt incurred?	2019-03					
	Dallas, TX 75267-9543  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	Yes	Other. Specify						
4.5	Ford Motor Credit Company	Last 4 digits of account number	1402	\$13,562.00				
	Nonpriority Creditor's Name	When was the debt incurred?	2017-09					
	661 Glenn Ave Wheeling, IL 60090-6017							
	Number Street City State Zip Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure						
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims						
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts					
	Yes	Other. Specify						
	Great Lakes Higher Education			****				
4.6	Corporation Nonpriority Creditor's Name	Last 4 digits of account number	<del></del>	\$291.00				
	Attn: Bankruptcy PO Box 7860	When was the debt incurred?	2014-05					
	Madison, WI 53707-7860 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure						
	At least one of the debtors and another		u ciaiii.					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharin	ng pians, and other similar debts					
	LIVoo	I I Other Specify						

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 23 of 57

Debtor	1 O'Brian, Eric D	Case number (f known)						
4.7	MPCS	Last 4 digits of account number	0775	\$168.00				
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 1116	When was the debt incurred?	2017-03					
	Newburgh, IN 47629-1116  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	Contingent						
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed						
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecure  Student loans  Obligations arising out of a separeport as priority claims	d claim:					
	No	Debts to pension or profit-sharir	g plans, and other similar debts					
	□Yes	_	g plants, and outs. Chimal accord					
4.8	MPCS Nonpriority Creditor's Name	Last 4 digits of account number	0820	\$79.00				
	Attn: Bankruptcy PO Box 1116	When was the debt incurred?	2018-07					
	Newburgh, IN 47629-1116  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharir						
	☐ Yes	<u>_</u>						
4.9	MPCS Nonpriority Creditor's Name	Last 4 digits of account number	5577	\$56.00				
	Attn: Bankruptcy PO Box 1116	When was the debt incurred?	2018-08					
	Newburgh, IN 47629-1116  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure						
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa						
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	☐ Yes	Other. Specify						

#### Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 24 of 57

Debtor 1 O'Brian, Eric D		Case number (f known)				
4.10	Southwest Credit Nonpriority Creditor's Name	Last 4 digits of account number	\$168.00			
	Nonpholity Creditors Name	When was the debt incurred?				
	4120 International Pkwy Carrollton, TX 75007-1957					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you ore report as priority claims	lid not			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.11	US Dept Veteran Affairs	Last 4 digits of account number 0071	\$125.00			
	Nonpriority Creditor's Name  Debt Management Center	When was the debt incurred? 2013-01				
	PO Box 11930					
	Saint Paul, MN 55111-0930  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you or report as priority claims	did not			
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.12	UCA Francia	Last 4 digits of account number				
4.12	Nonpriority Creditor's Name	Last 4 digits of account number	\$171.00			
		When was the debt incurred?				
	PO Box 6028 Indianapolis, IN 46206-6028					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you of	did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify				

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

## Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 25 of 57

Debtor 1 O'Brian, Eric D		Case number (f known)
Name and Address Ascendium Ed Solutions 111000 Usa Prkwy	On which entry in Part 1 or Part 2 did Line <b>4.6</b> of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Fishers, IN 46037	Last 4 digits of account number	7777
Name and Address AT&T Mobility	On which entry in Part 1 or Part 2 did Line <b>4.4</b> of ( <i>Check one</i> ):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims
PO Box 536216	Ellio <u>III di (Gricon Gric)</u> .	Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta, GA 30353-6216	Last 4 digits of account number	7405
Name and Address  Capital One Bank USA N	On which entry in Part 1 or Part 2 did Line <b>4.1</b> of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims
PO Box 30281	_	Part 2: Creditors with Nonpriority Unsecured Claims
Salt Lake City, UT 84130-0281	Last 4 digits of account number	9784
Name and Address	On which entry in Part 1 or Part 2 did	you liet the original creditor?
Charter Communications	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
400 Atlantic St FI 10		Part 2: Creditors with Nonpriority Unsecured Claims
Stamford, CT 06901-3512	Last 4 digits of account number	1237
Name and Address	On which entry in Part 1 or Part 2 did	vou list the original creditor?
Dept of Veterans Affai	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 11930 Saint Paul, MN 55111-0930		Part 2: Creditors with Nonpriority Unsecured Claims
James aut, Mix 33111-0330	Last 4 digits of account number	0071
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Diversified Consultant PO Box 551268	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Jacksonville, FL 32255-1268		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	1237
Name and Address	On which entry in Part 1 or Part 2 did	• •
Diversified Consultant PO Box 551268	Line 4.4 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonville, FL 32255-1268		• •
	Last 4 digits of account number	7405
Name and Address	On which entry in Part 1 or Part 2 did	
EFS Finance 3302 Avenue H Ste 112	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Rosenberg, TX 77471-2870		- Fait 2. Creditors with Nonphority Offsecured Claims
	Last 4 digits of account number	
Name and Address Ford Motor Credit Comp	On which entry in Part 1 or Part 2 did Line <b>4.5</b> of ( <i>Check one</i> ):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims
PO Box 542000	Line 4.3 of (Check one).	Part 2: Creditors with Nonpriority Unsecured Claims
Omaha, NE 68154-8000	Last 4 digits of account number	1402
Name and Address Kliment P Mitreski	On which entry in Part 1 or Part 2 did Line <b>4.5</b> of ( <i>Check one</i> ):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims
661 Glenn Ave	Ellio 110 di (chook ono).	Part 2: Creditors with Nonpriority Unsecured Claims
Wheeling, IL 60090-6017	Last 4 digits of account number	1402
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Mpcs	Line <u>4.7</u> of (Check one):	Part 1: Creditors with Priority Unsecured Claims
5055 Newburgh Plz		■ Part 2: Creditors with Nonpriority Unsecured Claims
Newburgh, IN 47629	Last 4 digits of account number	0775
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?

## Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 26 of 57

Debtor 1 O'Brian, Eric D		Case number (f known)
Mpcs 5055 Newburgh Plz Newburgh, IN 47629	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Newburgh, IN 47629	Last 4 digits of account number	0820
Name and Address Mpcs 5055 Newburgh Plz	On which entry in Part 1 or Part 2 did y Line 4.9 of (Check one):	/ou list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Newburgh, IN 47629	Last 4 digits of account number	5577
Name and Address Spectrum 1900 N Fares Ave Evansville, IN 47711-3959	On which entry in Part 1 or Part 2 did y Line 4.10 of (Check one):	vou list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address St. Vincent Urgent Care 100 S Rosenberger Ave Evansville, IN 47712-6504	On which entry in Part 1 or Part 2 did y Line 4.7 of (Check one):	vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	0775
Name and Address St. Vincent Urgent Care 100 S Rosenberger Ave Evansville, IN 47712-6504	On which entry in Part 1 or Part 2 did y Line 4.8 of (Check one):  Last 4 digits of account number	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	0820
Name and Address St. Vincent Urgent Care 100 S Rosenberger Ave Evansville, IN 47712-6504	On which entry in Part 1 or Part 2 did y Line 4.9 of (Check one):  Last 4 digits of account number	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
		5577
Name and Address Sunrise Credit Services, Inc. PO Box 9100 Farmingdale, NY 11735-9100	On which entry in Part 1 or Part 2 did y Line <u>4.4</u> of ( <i>Check one</i> ):	vou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	7405
Name and Address TruGreen 860 Ridge Lake Blvd Memphis, TN 38120-9434	On which entry in Part 1 or Part 2 did y Line 4.2 of (Check one):	vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
. ,	Last 4 digits of account number	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Tatal alaima	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 2,595.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 2,595.00
				Total Claim
Total eleime	6f.	Student loans	6f.	\$ 291.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 27 of 57

Debtor 1 O'Brian, Eric D

 Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

Case number (f known)

<sup>61.</sup> \$ 15,314.00

6j. \$ **15,605.00** 

Fill in th					
Debtor 1	Eric D O'Brian				
	First Name	Middle Name	Last Name	<del></del> )	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF INDIANA, EVANSVILLE DIVISIO	N	
Case number					☐ Check if this is an amended filing

#### Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Acceptance Now Attn: Bankruptcy 5501 Headquarters Dr Plano, TX 75024-5837	Installment account opened 6/1/2019 Credit Limit: \$3,419.00, Remaining Balance: \$2,859.00 Television Lease \$218.06 per month
2.2	Progressive Leasing 256 W Data Dr Draper, UT 84020-2315	Furniture Lease \$52.80 per month

## Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 29 of 57

					· g · · ·	
Fill in	this information to identif	y your case:				
Debtor 1	Eric D O'Brian					
Dobtor 2	First Name	Middle Name	Last Name		}	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT	OF INDIANA, EVANSVILI	LE DIVISION		
Case number					☐ Check if this is a	ın
(					amended filing	"
Schedul Codebtors are		e also liable for any debts			te as possible. If two marrie	
and number th		the left. Attach the Additi			Iditional Pages, write your n	
1. Do you	have any codebtors? (If y	ou are filing a joint case, do	not list either spouse as a	codebtor.		
□ No ■ Yes						
	the last 8 years, have you Idaho, Louisiana, Nevada,				states and territories include	Arizona,
■ No. Go □ Yes. Di	to line 3. d your spouse, former spous	se, or legal equivalent live w	ith you at the time?			
line 2 aga	in as a codebtor only if th hedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure y	ou have listed the o	with you. List the person s creditor on Schedule D (Offic ale E/F, or Schedule G to fill	cial Forn
	umn 1: Your codebtor e, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedu	editor to whom you owe the les that apply:	debt
550	ceptance Now 11 Headquarters Dr no, TX 75024-5837			☐ Schedule D, ☐ Schedule E/I ■ Schedule G Acceptance No	F, line <b>2.1</b>	

Official Form 106H Software Copyright (c) 2019 CINGroup - www.cincompass.com

EIII	in this information to identify your on					ı				
	in this information to identify your care btor 1									
_	btor 2	···			_					
Uni	ited States Bankruptcy Court for the:	SOUTHERN DISTRIC	CT OF INDIANA, EV	ANSVILLE						
	se number nown)		-			☐ An ☐ As		d filing	g postpetition o	chapter 13
<u>O</u>	fficial Form 106I					MN	// DD/ Y	YYY		
S	chedule I: Your Inco	ome								12/15
spo atta	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O  Tt 1: Describe Employment  Fill in your employment	spouse is not filing wit	h you, do not inclu nal pages, write yo	de informa	atior	about you	ur spou er (if kn	se. If mor own). Ans	e space is ne swer every qu	eded,
	information.		Debtor 1			_			ling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				☐ Employed ☐ Not employed			
	employers.	Occupation	Delivery							
	Include part-time, seasonal, or self-employed work.	Employer's name	Monarch Beve	erage Co	mpa	iny _				
	Occupation may include student or homemaker, if it applies.	Employer's address	4431 Proficier Evansville, IN		81					
		How long employed th	nere? 7 year	rs			_			
Pai	Give Details About Mont	thly Income								
	mate monthly income as of the dat ss you are separated.	te you file this form. If y	ou have nothing to re	eport for an	y line	e, write \$0 in	n the spa	ace. Includ	e your non-filir	ng spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this forn		oine the information t	for all emplo	oyers	for that pe	erson on	the lines b	elow. If you ne	ed more
						For Debto	or 1		btor 2 or ing spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	4,1	35.72	\$	N/A	
3.	Estimate and list monthly overting	ne pay.		3.	+\$		0.00	+\$	N/A	I
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	4,135	5.72	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Debt	tor 1	O'Brian, Eric D	_	Ca	se number (if known)			
				F	or Debtor 1	For Debtor		
	Cop	by line 4 here	4.	\$	4,135.72	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	882.45	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$		\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify: 401k Loan 1	5h.			+ \$	N/A	
		401k Loan 2		\$	61.00	\$	N/A	
		401k	_	\$	244.29	\$	N/A	
		Term Life Insurance	_	\$	9.43	\$	N/A	
		GTL Health Incomes	_	\$ \$	1.70	\$	N/A	
		Health Insurance HSA	_	Ф Ф	138.15	\$ \$	N/A N/A	
		ADD&D Supplemental		φ 2	168.85 15.00	\$	N/A N/A	
		Child Term Life Insurance	_	\$	2.00	\$	N/A	
		Spouse Term Life Insurance	_	\$	3.30	\$	N/A	
		Vision Insurance	_	\$	1.63	\$	N/A	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,677.09	\$	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,458.63	\$	N/A	
	8a. 8b. 8c. 8d. 8e. 8f.	Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: Pension or retirement income Other monthly income. Specify:	8a. 8b. 8c. 8d. 8e. — 8f. 8g. 8h.	\$ \$ \$ \$	0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A	1
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$	N/A	_
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	2,458.63 + \$	N/A	= \$	2,458.63
	Incluothe Do r Spe	te all other regular contributions to the expenses that you list in Schedule and de contributions from an unmarried partner, members of your household, your dear friends or relatives.  Into include any amounts already included in lines 2-10 or amounts that are not available.	epende ailable	to pa	y expenses listed in	Schedule J. 11.	+\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain					\$	2,458.63
							monthly	

Official Form 106l Schedule I: Your Income page 2

# Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 32 of 57

Debtor 1	O'Brian, Eric D	Case number (if known)
13. <b>Do</b>	you expect an increase or decrease within the year after you file this form	?
	No.	
	Yes. Explain:	

Official Form 106l Schedule I: Your Income page 3

Fill ir	n this information to identify yo	ur case:				
Debte	or 1 Eric D O'Bria	an		Check	c if this is:	
Debto	or 2			_	An amended filing A supplement show	ing postpetition chapter 13
(Spot	use, if filing)				expenses as of the f	
Unite	d States Bankruptcy Court for the:	SOUTHERN DISTRICT OF INDIA EVANSVILLE DIVISION	NA,	N	MM / DD / YYYY	
Case (If kno	number own)					
	ficial Form 106J					
	hedule J: Your I					12/15
infor	rmation. If more space is nee nown). Answer every questic					
1.	Is this a joint case?					
	■ No. Go to line 2.  ☐ Yes. <b>Does Debtor 2 live i</b>	n a separate household?				
	☐ No ☐ Yes. Debtor 2 mus	st file Official Form 106J-2, Expenses t	for Separate Househo	old of Debtor 2	2.	
2.	Do you have dependents?	□ No				
	Do not list Debtor 1 and Debtor 2.	■ Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.		Daughter		4	Yes
						□ No
						☐ Yes ☐ No
						☐ Yes
						□ No
						☐ Yes
3.	Do your expenses include expenses of people other th yourself and your depender	. a IIVes				
Part			ara vaina thia farr		lament in a Chant	or 42 cose to report
expe		our bankruptcy filing date unless yo ankruptcy is filed. If this is a supple				
Inclu	ude expenses paid for with n	on-cash government assistance if	you know the			
	e of such assistance and had cial Form 106l.)	ve included it on Schedule I: Your I	ncome		Your expe	enses
4.	The rental or home ownersh payments and any rent for the	nip expenses for your residence. In ground or lot.	clude first mortgage	4. \$		520.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's,			4b. \$		0.00
		pair, and upkeep expenses		4c. \$		50.00
5		on or condominium dues ents for vour residence, such as hom	ne equity loans	4d. \$ 5. \$		0.00

Deb	tor 1 O'Brian, Eric D	Case num	nber (if known)	
6.	Utilities:			
٥.	6a. Electricity, heat, natural gas	6a.	\$	210.00
	6b. Water, sewer, garbage collection	6b.	\$	68.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	172.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	<del></del> 7.	\$	450.00
8.	Childcare and children's education costs	8.	\$	150.00
9.	Clothing, laundry, and dry cleaning	9.	\$	100.00
10.	Personal care products and services	10.	\$	40.00
11.	Medical and dental expenses	11.	\$	30.00
12.	Transportation. Include gas, maintenance, bus or train fare.	40		0.00
40	Do not include car payments.	12.	•	
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	· <u> </u>	100.00
	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	·	0.00
	15c. Vehicle insurance	15c.	· · · · · · · · · · · · · · · · · · ·	78.00
	15d. Other insurance. Specify:	15d.	·	0.00
16	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		<u> </u>	0.00
	Specify:	16.	\$	0.00
17.	Installment or lease payments: 17a. Car payments for Vehicle 1	17a.	\$	74.00
	17b. Car payments for Vehicle 2	17b.	·	0.00
	17c. Other. Specify:	17c.	·	0.00
	17d. Other. Specify:	— 17d. 17d.	·	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as		·	0.00
40	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
19.	Other payments you make to support others who do not live with you.	40	<b>&gt;</b>	0.00
20	Specify:  Other real property expenses not included in lines 4 or 5 of this form or on Sched	19.		
20.	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20e.	·	0.00
21.	Other: Specify: Furniture Lease Payment		+\$	53.00
	Television Lease Payment		+\$	218.00
	Gasoline	-	+\$	200.00
	Vehicle Maintenance		+\$	50.00
				30.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	2,563.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,563.00
23.	Calculate your monthly net income.		•	
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	2,458.63
	23b. Copy your monthly expenses from line 22c above.	23b.		2,563.00
	23c. Subtract your monthly expenses from your monthly income.			40.4.2-
	The result is your monthly net income.	23c.	\$	-104.37

#### 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Debtor shares custody of his minor daughter with his ex-spouse 50/50.

Subject to Debtor's acceptance of a Chapter 7 Bankruptcy Post-petition Retainer Agreement, Debtor anticipates a temporary monthly, semimonthly, biweekly, or weekly expense necessary to pay the proposed post-petition attorney fees disclosed in 2016(b). As said expense is temporary, it is not itemized in Schedule J as it would give an inflated assessment of expenses of Debtor(s).

Fill in this in	nformation to identify y	our case:			
Debtor 1	Eric D O'Brian				
	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name		
opouse ii, iiiiig)	i iist ivaine	Wilde Name	Lastivame		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	Γ OF INDIANA, EVANSVI	LLE DIVISION	
Case number				Ì	
(if known)					☐ Check if this is an
					amended filing
Official Form	m 106Dec				
		an Individua	I Debtor's S	chedules	12/15
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
■ No					
□ Yes I	Name of person			Attach Ran	nkruptcy Petition Preparer's Notice,
					n, and Signature (Official Form 119)
•	alty of perjury, I declare true and correct.	that I have read the sum	mary and schedules file	d with this declaration	n and
Y Iol Eric	c D O'Brian		X		
	C D O Brian O'Brian		^Signature o	f Debtor 2	
	re of Debtor 1		2.9	<b>.</b>	
Date	September 16, 2019		Date		
0					

	Fill in this	s information to ident	ify your case:					
Dob			ny your ouse.					
Dec	otor 1	Eric D O'Brian First Name	Middle Name		Last Name	}		
	otor 2	First Name	MCddl- News		LastNassa			
(Spo	use if, filing)	First Name	Middle Name		Last Name			
Unit	ted States Bai	nkruptcy Court for the:	SOUTHERN DISTRICT (	)F INDI	ANA, EVANSVILLE D	DIVISION		
	se number						_	heck if this is an mended filing
Sta		of Financial	Affairs for Individ					4/1:
infoı (if kr	rmation. If m nown). Answe	ore space is needed, er every question.	ole. If two married people ar attach a separate sheet to the arital Status and Where You s?	his form	n. On the top of any			
	■ Not mar	ried						
2.	During the la	ast 3 years, have you	lived anywhere other than v	vhere y	ou live now?			
	□ No ■ Yes. Lis	t all of the places you liv	ved in the last 3 years. Do not	include ب	where you live now.			
	Debtor 1 Pr	ior Address:	Dates Debtor 1 there	lived	Debtor 2 Prior Ad	dress:		Dates Debtor 2 lived there
	101 SE 1s Evansville	t St e, IN 47708-1434	From-To: <b>7/2017 - 12/20</b>	)17	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
	3450 Crate Evansville	er Dr e, IN 47725-6844	From-To: <b>12/2017 - 9/2</b> 0	)18	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
	es and territorie	es include Arizona, Cal	ver live with a spouse or leg ifornia, Idaho, Louisiana, Nev edule H: Your Codebtors (Offi	ada, Ne	ew Mexico, Puerto Rid			
Par	t 2 Explai	n the Sources of You	r Income					
4.	Fill in the total	al amount of income yo	nployment or from operating u received from all jobs and a lave income that you receive to	ill busine	esses, including part-	time activities.	calenda	ar years?
	□ No							
	Yes. Fill	in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of income Check all that apply.		Gross income (before deductions and exclusions)

Official Form 107

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 37 of 57

Case number (if known)

					Debtor 1			Debtor 2		
					Sources of income Check all that apply.	(be	oss income fore deductions and lusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			1 of currer iled for ban	nt year until kruptcy:	■ Wages, commissions, bonuses, tips		\$37,151.91	☐ Wages, combonuses, tips	missions,	
					☐ Operating a business			☐ Operating a	business	
			dar year: December (	31, 2018 )	■ Wages, commissions, bonuses, tips		\$42,482.00	☐ Wages, combonuses, tips	missions,	
					☐ Operating a business			Operating a	business	
			lar year bef December 3		■ Wages, commissions, bonuses, tips		\$45,000.00	☐ Wages, combonuses, tips	missions,	
					☐ Operating a business			☐ Operating a	business	
	you a	re filir ach s No	ng a joint cas	se and you ha	ons; rental income; interest; d ve income that you received to ne from each source separate	ogether,	list it only once under I	Debtor 1.	anu yamum	g and lottery willings.
					Debtor 1			Debtor 2		
					Sources of income Describe below.	eac (be	ch source fore deductions and lusions)	Sources of inc Describe below.		Gross income (before deductions and exclusions)
Par	t 3:	List	Certain Pa	yments You	Made Before You Filed for	Bankru	ptcy			
6.	_	either No.	Neither De	ebtor 1 nor D	s debts primarily consumer ebtor 2 has primarily consu- personal, family, or household	umer de	ebts. Consumer debts	are defined in 11 U	.S.C. § 101(8	3) as "incurred by an
			During the No.	90 days befor	e you filed for bankruptcy, dic	d you pa	y any creditor a total of	\$6,825* or more?		
			☐ Yes	creditor. Do payments to	ach creditor to whom you paid not include payments for do o an attorney for this bankrupt on 4/01/22 and every 3 years	mestic cy case	support obligations, su	ch as child suppor	t and alimon	
	•	Yes.	Debtor 1 c	or Debtor 2 o	r both have primarily consure you filed for bankruptcy, dic	umer de	ebts.			
			□ <sub>No.</sub>	Go to line 7						
			■ Yes		ach creditor to whom you paid or domestic support obligation otcy case.					
	Cred	ditor':	s Name and	l Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for

Debtor 1 O'Brian, Eric D

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 38 of 57

Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	BSI Financial Services 1425 Greenway Dr Ste 400 Irving, TX 75038-2480	7/2019, 8/2019, 9/2019	\$1,560.00	\$64,958.00	■ Mortgage □ Car □ Credit Ca □ Loan Rep □ Suppliers □ Other	ard payment
7.	Within 1 year before you filed for bankruptc Insiders include your relatives; any general partr which you are an officer, director, person in cont business you operate as a sole proprietor. 11 U.	ners; relatives of any generator, or owner of 20% or mo	al partners; partnership re of their voting secu	ps of which you are rities; and any mar	e a general parti naging agent, ind	ner; corporations of cluding one for a
	□ No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	Timothy O'Brian 1306 W Columbia St Evansville, IN 47710-1428	8/2019	\$1,288.00	\$800.00	Money Lo	aned
	insider? Include payments on debts guaranteed or cosign  ■ No □ Yes. List all payments to an insider Insider's Name and Address	ned by an insider.  Dates of payment	Total amount	Amount you	Reason for	this payment
	moladi di Namo ana Alaar 335	Dates of paymont	paid	still owe	Include cred	
Pai	t 4: Identify Legal Actions, Repossessions	s, and Foreclosures				
9.	Within 1 year before you filed for bankruptc List all such matters, including personal injury countries and contract disputes.  No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
	FORD MOTOR CREDIT COMPANY LLC V. ERIC O'BRIAN 87D02-1908-CC-001402	Civil Collection	Warrick County Court 1 County Sq # 3 Boonville, IN 4	300	■ Pending □ On appe □ Conclude	al
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below  ☐ No. Go to line 11.  ☐ Yes. Fill in the information below.		rty repossessed, for	reclosed, garnish	ed, attached, s	seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				1. 11.13

Debtor 1 O'Brian, Eric D

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 39 of 57

O'Brian, Eric D Debtor 1 Case number (if known) **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened Ford Motor Credit Company 2017 Ford Escape 3/2019 \$13,562.00 PO Box 6508 Mesa, AZ 85216-6508 Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized or levied. Internal Revenue Service 2018 Federal Income Tax Refund 2/13/2019 \$1,289.00 PO Box 7346 ☐ Property was repossessed. Philadelphia, PA 19101-7346 ☐ Property was foreclosed. ☐ Property was garnished. Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☐ Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Dates you gave Gifts with a total value of more than \$600 per Describe the gifts Value person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 40 of 57

Case number (if known)

6.	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepar	ing a bankruptcy peti	tion?			y to anyone you
	Include any attorneys, bankruptcy petition preparers	s, or credit counseling a	gencies for services	s required in	n your bankruptcy.	
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	alue of any prope	rty	Date payment or transfer was made	Amount of payment
	The Law Offices of Dax J. Miller, LLC 201 NW 4th St Ste 111 Evansville, IN 47708-1356 daxjmiller.com	Credit Reports	Filing Fee \$335 \$33.00, Credit 76, Attorney Fe		9/16/19	\$399.00
<b>17.</b>	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors or Do not include any payment or transfer that you list.  No	or to make payments			or transfer any propert	y to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and v transferred	alue of any proper	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made gifts and transfers that you have already listed on the	ness or financial affai as security (such as the	rs?			
	No					
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and v property transfer		paymen	e any property or ts received or debts exchange	Date transfer was made
	Person's relationship to you			•	· ·	
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect		property to a self	f-settled tr	ust or similar device o	f which you are a
	No Yes. Fill in the details.					
	Name of trust	Description and v	alue of the proper	ty transfer	red	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instru	ıments, Safe Deposit	Boxes, and Storag	e Units		
20.	Within 1 year before you filed for bankruptcy, visold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associated.	ther financial account	ts; certificates of c			, ,
	No					
	Yes. Fill in the details.		_			
		ast 4 digits of account number	Type of account instrument	o n	Date account was closed, sold, noved, or ransferred	Last balance before closing or transfer

Debtor 1 O'Brian, Eric D

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 41 of 57 Debtor 1 O'Brian, Eric D Case number (if known) 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Describe the contents Name of Financial Institution Who else had access to it? Do you still have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Nο Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Where is the property? (Number, Street, City, State and ZIP Owner's Name Describe the property Value Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Governmental unit Environmental law, if you Date of notice Name of site Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No

Address (Number, Street, City, State and

Environmental law, if you

know it

Governmental unit

ZIP Code)

Date of notice

Yes. Fill in the details.

Address (Number, Street, City, State and ZIP Code)

Name of site

Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 42 of 57 O'Brian, Eric D Case number (if known) Debtor 1 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Eric D O'Brian Signature of Debtor 2 Eric D O'Brian Signature of Debtor 1 Date Date September 16, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Official Form 107

■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this	information to identi	y your case:		
Debtor 1	Eric D O'Brian			
Dahtar 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	SOUTHERN DIST	TRICT OF INDIANA, EVANSVILLE DIVISION	
Case number				
(if known)				☐ Check if this is an amended filing
Official For		f l!!.	distributed as Filips on Line state Observation	
Statemen	t of Intentio	n for Indiv	viduals Filing Under Cha	pter / 12/15
	dual filing under chap claims secured by you		out this form if:	
you have leased You must file this f	d personal property a form with the court wi er is earlier, unless the	nd the lease has no thin 30 days after y	ot expired. you file your bankruptcy petition or by the date a time for cause. You must also send copies to t	
	ple are filing together the form.	in a joint case, bot	h are equally responsible for supplying correct	information. Both debtors must sign
	d accurate as possible ir name and case num		needed, attach a separate sheet to this form. Or	the top of any additional pages,
Part 1: List You	ır Creditors Who Have	Secured Claims		
1. For any creditors information below		rt 1 of Schedule D:	Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
	litor and the property th	nat is collateral	What do you intend to do with the property the secures a debt?	hat Did you claim the property as exempt on Schedule C?
Creditor's BS	I Financial Service	s	☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	etion Yes
Description of	401 Stanley Ave, E	vansville, IN	Retain the property and enter into a Reaffirma Agreement.	tion • res
property securing debt:	47711-3349		☐ Retain the property and [explain]:	
Creditor's <b>Lin</b>	noln Automotive Fi	nancial	■ Surrender the property.	■ No
name: Se	rvices		Retain the property and redeem it.	
Descriptions			☐ Retain the property and enter into a Reaffirma	☐ Yes
Description of property securing debt:	2015 Ford Edge F	WD	Agreement.  ☐ Retain the property and [explain]:	
_	emain Financial		☐ Surrender the property.	■ No
name:			<ul><li>Retain the property and redeem it.</li><li>Retain the property and enter into a <i>Reaffirma</i></li></ul>	ation
	1998 Chevrolet S1 2WD	0 Pickup	Agreement.  Retain the property and [explain]:	

Official Form 108

### Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 44 of 57

Debtor 1 O'Brian, Eric D	Case number (if known)
securing debt:	
	in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in bired leases are leases that are still in effect; the lease period has not yet ended. You rustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my property that is subject to an unexpired lease.	nintention about any property of my estate that secures a debt and any personal
X /s/ Eric D O'Brian	X
Eric D O'Brian Signature of Debtor 1	Signature of Debtor 2
Date September 16, 2019	Date

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Southern District of Indiana, Evansville Division

In re	O'Brian, Eric D	Case No.	
	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION OF ATTOR	NEY FOR D	EBTOR
	D	6 4 1	

Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept\_\_\_\_\_ Prior to the filing of this statement I have received Balance Due The source of the compensation paid to me was: Debtor ☐ Other (specify): The source of compensation to be paid to me is: Debtor ☐ Other (specify): 4. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

- In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
  - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - d. [Other provisions as needed]

Cost and Fees paid prior to filing are done so pursuant to a pre-petition retainer executed prior to filing and are for services rendered pre-petition only and include legal advice, obtaining credit reports, reviewing income and documents, preparing the voluntary petition (Official Form 101), statement of current monthly income (Form 122A-1), schedules, statement of financial affairs, statement of social security number, pay advices and the credit counseling certificate and the filing of the voluntary petition (Official Form 101).

Fees paid post-petition are done so pursuant to a post-petition retainer that has been executed after the filing of the petition and are for services rendered post-petition and include the filing of forms 122A-1, 122A-2, Summary of Schedules, Schedules, Statement of Intention, Statement of Financial Affairs, 2016-B Disclosure, Credit Matrix, Statement of Social Security Number and Credit Counseling Certificate, post-petition legal advice via phone consultations, in-office consultations, and/or email correspondence, assisting clients in obtaining and submitting documentation and information to the Chapter 7 Trustee, attending one 341 Meeting of Creditors, filing/sending Suggestions/Notices of Bankruptcy, negotiating buy backs of personal property or compromises with the Chapter 7 Trustee, attending 2004 Examinations or hearings routine to a typical Chapter 7 Bankruptcy (does not include hearings resulting from Client(s) prior failure to comply with provisions of the Bankruptcy Code, Bankruptcy Rules, or Local Rules), authorization letters to creditors, filing of Debtor Education certificates, and completion and submission of reaffirmations agreements.

Aforementioned fees do not include services required due to failure of Debtor(s) to disclose information regarding assets, liabilities, answers related to the Statement of Financial Affairs, timely provide documents or information to Counsel, the Chapter 7 Trustee, US Trustee or creditor. If the Debtor(s) cause(s) the issue and ...

By agreement with the debtor(s), the above-disclosed fee does not include the following service: 6.

> ...(continued) it's not a natural consequence of the case then then Counsel reserves the right to charge additional fees. If additional fees are incurred, Counsel will file an amended fee disclosure for any additional fees charged/incurred for post-petition services. If the Debtor(s) decide(s) not to retain Counsel or later cancel(s) the Post-Petition agreement, Counsel will amend this disclosure. Should the post-petition retainer be cancelled/rescinded, Counsel remains attorney-of-record until such time that this Court enters an Order Granting Counsel's Motion to Withdraw as Counsel.

In re	O'Brian, Eric D	Case No.		
	Debtor(s)			

### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

(Continuation Sheet)

(Continuation Sheet)			
	CERTIFICATION		
I certify that the foregoing is a complete statementhis bankruptcy proceeding.	nt of any agreement or arrangement for payment to me for representation of the debtor(s) in		
September 16, 2019	/s/ Dax J. Miller		
Date	Dax J. Miller		
	Signature of Attorney		
	The Law Offices of Dax J. Miller, LLC		
	201 NW 4th St Ste 111		
	Evansville, IN 47708-1356		
	(812) 286-0776		
	dax@daxjmiller.com		
	Name of law firm		

### Case 19-71170-AKM-7 Doc 1 Filed 09/16/19 EOD 09/16/19 16:42:41 Pg 47 of 57

### United States Bankruptcy Court Southern District of Indiana, Evansville Division

IN RE:		Case No.		
O'Brian, Eric D		Chapter 7		
	Debtor(s)	·		
	VERIFICATION OF CREDITO	OR MATRIX		
The above named debtor(s) hereby	verify(ies) that the attached matrix listi	ng creditors is true to the best of my(our) knowledge.		
Date: September 16, 2019	Signature: /s/ Eric D O'Brian			
	Eric D O'Brian	Debtor		
Date:	Signature:			
	-	Joint Debtor, if any		

Acceptance Now 5501 Headquarters Dr Plano, TX 75024-5837

Ascendium Ed Solutions 111000 Usa Prkwy Fishers, IN 46037

AT&T Mobility PO Box 536216 Atlanta, GA 30353-6216

BSI Financial Services 1425 Greenway Dr Ste 400 Irving, TX 75038-2480

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285

Capital One Bank USA N PO Box 30281 Salt Lake City, UT 84130-0281

Charter Communications 400 Atlantic St Fl 10 Stamford, CT 06901-3512 Day Knight & Associates 15559 Manchester Rd Ballwin, MO 63011-3001

Dept of Veterans Affai PO Box 11930 Saint Paul, MN 55111-0930

Diversified Consultant PO Box 551268 Jacksonville, FL 32255-1268

Diversified Consultants, Inc. Attn: Bankruptcy PO Box 679543 Dallas, TX 75267-9543

EFS Finance 3302 Avenue H Ste 112 Rosenberg, TX 77471-2870

Ford Motor Credit Comp PO Box 542000 Omaha, NE 68154-8000

Ford Motor Credit Company 661 Glenn Ave Wheeling, IL 60090-6017

Great Lakes Higher Education Corporation Attn: Bankruptcy PO Box 7860 Madison, WI 53707-7860

Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

Kliment P Mitreski 661 Glenn Ave Wheeling, IL 60090-6017

Linoln Automotive Financial Services Attn: Bankruptcy PO Box 542000 Omaha, NE 68154-8000

MPCS Attn: Bankruptcy PO Box 1116 Newburgh, IN 47629-1116

Mpcs 5055 Newburgh Plz Newburgh, IN 47629 Onemain PO Box 1010 Evansville, IN 47706-1010

Onemain Financial Attn: Bankruptcy PO Box 3251 Evansville, IN 47731-3251

Southwest Credit 4120 International Pkwy Carrollton, TX 75007-1957

Spectrum 1900 N Fares Ave Evansville, IN 47711-3959

St. Vincent Urgent Care 100 S Rosenberger Ave Evansville, IN 47712-6504

Sunrise Credit Services, Inc. PO Box 9100 Farmingdale, NY 11735-9100

TruGreen 860 Ridge Lake Blvd Memphis, TN 38120-9434 US Dept Veteran Affairs Debt Management Center PO Box 11930 Saint Paul, MN 55111-0930

USA Funds PO Box 6028 Indianapolis, IN 46206-6028

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapt	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee
 \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.</a>

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# © 2019 CINgroup 1.866.218.1003 - CINcompass (www.cincompass.com)

### United States Bankruptcy Court Southern District of Indiana, Evansville Division

IN RE:		Case No.
O'Brian, Eric D		Chapter 7
Debtor(s)		<u>-</u>
	OF NOTICE TO CONSUMER D 42(b) OF THE BANKRUPTCY CO	
Certificate of [No	on-Attorney] Bankruptcy Petition	Preparer
I, the [non-attorney] bankruptcy petition preparer signotice, as required by § 342(b) of the Bankruptcy Co		y that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petitio Address:		Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
x		(Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of officer partner whose Social Security number is provided at		
	Certificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have receive	ed and read the attached notice, as require	ed by § 342(b) of the Bankruptcy Code.
O'Brian, Eric D	X /s/ Eric D O'Brian	9/16/2019
Printed Name(s) of Debtor(s)	Signature of Debtor	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Case No. (if known)

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Signature of Joint Debtor (if any)

Date